

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004711

FILED
Mar 19, 2009
Secretary of State

Entity Name: STONEGATE AT SILVER LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 32-0061880 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC.
2180 W. SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BELCASTRO, JOSEPH
Address: 33336 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

Title: VPD () Delete
Name: ROBERTS, VANCE
Address: 10209 GRANITE CT
City-St-Zip: LEESBURG, FL 32778

Title: SD () Delete
Name: MOLER, STEPHANIE
Address: 33339 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: REIHER, PEGGY
Address: 33226 IRONGATE DR
City-St-Zip: LEESBURG, FL 32778

Title: SD (X) Change () Addition
Name: GAINEY, HEATHER
Address: 33402 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

Title: TD () Change (X) Addition
Name: COE, DIXIE
Address: 33148 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

Title: D () Change (X) Addition
Name: SANKO, JAMES
Address: 33141 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH BELCASTRO

PD

03/19/2009

Electronic Signature of Signing Officer or Director

_____ Date